

06-04-01

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Express Mail No. EK381340288US

Docket No. 13761-754

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor(s): Peter C. Brooks, Hollywood, California; Dorothy Rodriguez, La Habra, California  
 Serial No.:  
 Filing Date: May 31, 2001  
 Title: NOVEL METHOD AND COMPOSITION FOR INHIBITION OF ANGIOGENESIS AND TUMOR GROWTH USING COMPOUNDS BASED ON A SEQUENCE WITHIN MMP-2

**UTILITY PATENT APPLICATION & FEE TRANSMITTAL**  
 (for nonprovisional applications under 37 CFR § 1.53(b))

Assistant Commissioner for Patents  
**BOX PATENT APPLICATION**  
 Washington, D.C. 20231

Sir:

Transmitted herewith for filing in connection with the above-identified patent application are the following:

<b>I. Elements of the Application</b>	
<input type="checkbox"/> Application	[0] page(s) of Cover Sheet [29] page(s) of Specification [4] page(s) of Claims (35 claims) [1] page(s) of Abstract [5] sheets of Drawings [X] Formal [ ] Informal
<input type="checkbox"/> Declaration and Power of Attorney [ ] page(s) [ ] Unexecuted [ ] Executed [ ] Copy from prior application (37CFR § 1.63(d))	
<input type="checkbox"/> Deletion of Inventors: [ ] page(s) of signed statement deleting inventor(s) (37CFR § 1.63(d) & 1.33(b))	
<input type="checkbox"/> Request and Certification Under 35U.S.C. 122(b)(2)(B)(i)	
<input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission: [ ] page(s) of Sequence Listing (paper copy) [ ] disk(s) containing Sequence Listing (computer readable copy) [ ] page(s) of Statement Under 37 CFR 1.821(f)	
<input type="checkbox"/> Microfiche Computer Program Appendix _____	
<b>II. Claim for U.S. Priority</b>	
<input type="checkbox"/> This application is a <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-Part of Prior Application No. _____ filed _____. (35 USC §120) <input type="checkbox"/> This application claims the benefit under 35 U.S.C. §119(e) of United States Application Serial No. 60/_____ filed _____. (Provisional Application) <input type="checkbox"/> The entire disclosure of the prior application referenced above, is considered as being part of the application filed herewith and is herein incorporated by reference in its entirety.	
<b>III. Claim for Foreign Priority</b>	
<input type="checkbox"/> This application claims the benefit under 35 USC §119 of Prior Application No. _____ filed _____. <input type="checkbox"/> Certified Copy of Priority Document [ ] page(s) <input type="checkbox"/> English Translation of Priority Document [ ] page(s)	

**IV. Accompanying Documents**

- ☐ Assignment Papers [ ] page(s) of Recordation Cover Sheet [ ] page(s) of Assignment
- ☒ Applicant(s) claims Small Entity Under 37 CFR § 1.27 [ ] Verified Small Entity Statement was previously filed in Prior Application No. \_\_\_\_\_ on \_\_\_\_\_, \_\_\_\_\_.
- ☐ Information Disclosure Statement [ ] page(s) of PTO-1449 [ ] copies of IDS References
- ☐ A Preliminary Amendment [ ] page(s)
- ☐ A copy of a Petition for Extension of Time ( \_ mos.) filed simultaneously in Prior Application No. \_\_\_\_\_
- ☐ A copy of a Submission of Processing & Retention Fee (37 CFR § 1.78(a)(1) which is being filed simultaneously in Prior Application No. \_\_\_\_\_
- ☐ Other \_\_\_\_\_ (specify)
- ☒ Return Receipt Postcard (MPEP 503) (*Should be specifically itemized*)

**V. Fee Calculation**

<input type="checkbox"/> The following fees are submitted:					CALCULATIONS
			OTHER THAN SMALL ENTITY	SMALL ENTITY	\$
BASIC NATIONAL FILING FEE			\$ 710.00	\$ 355.00	\$355.00
EXTRA CLAIMS FEE					
CLAIMS	# FILED	# EXTRA	RATE	RATE	
Total Claims	35 - 20 =	15	× \$18.00	× \$ 9.00	\$135.00
Independent claims	7 - 3 =	4	× \$80.00	× \$40.00	\$160.00
MULTIPLE DEPENDENT CLAIM(S)					
<input type="checkbox"/> Yes <input type="checkbox"/> No			\$270.00	\$135.00	\$
Fee for recordation of the enclosed assignment (37 CFR 1.21(h), 3.28, 3.31).					
_____ (Numbers of Applications) × \$40.00					\$
OTHER FEES _____ (specify)					\$
OTHER FEES _____ (specify)					\$
<b>TOTAL FEES =</b>					<b>\$650.00</b>

- a. ☐ A check in the amount of \$\_\_\_\_\_ to cover the above fees is enclosed.
- b. ☐ Please charge Deposit Account No.: \_\_\_\_\_, Docket No. \_\_\_\_\_, in the amount of \$\_\_\_\_\_ to cover the above fees. *A duplicate copy of this sheet is enclosed.*
- c. ☐ The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. \_\_\_\_\_, Docket No. \_\_\_\_\_.  
*A duplicate copy of this sheet is enclosed.*

SEND ALL CORRESPONDENCE TO:

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SIGNATURE

DATE

Rajiv Yadav  
 NAME

May 31, 2001  
 43,999  
 REGISTRATION NUMBER